

Appln. No.: 10/757,844  
Amendment Dated November 20, 2006  
Reply to Office Action of August 18, 2006

MATP-641US

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NUV 20 2006

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No: 10/757,844  
Applicant: Todd S. Bowser  
Filed: January 15, 2004  
Title: REDUCING BURN-IN ASSOCIATED WITH MISMATCHED VIDEO IMAGE/DISPLAY ASPECT RATIOS  
TC/A.U.: 2622  
Examiner: Brian P. Yenke  
Confirmation No.: 5075  
Docket No.: MATP-641US

AMENDMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Responsive to the Office Action dated August 18, 2006, please amend the above-identified application as follows:

- Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.
- Remarks/Arguments** begin on page 8 of this paper.

11/21/2006 TL0111 08800051 10757844

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5100 Tilghman Street  
Allentown, PA 18104  
Phone: 610-530-8100  
Fax: 610-530-8200

## FAX FILING IN U.S. PATENT & TRADEMARK OFFICE

DATE: November 20, 2006 TIME: \_\_\_\_\_

TO:	Mail Stop Amendment	FAX NO.:	571-273-8300
FROM:	Kenneth N. Nigon	ADMIN. ASST.:	Patricia C. Boccella
APPLN. NO.:10/757,844	ATTY. DOCKET NO.: MATP-641US		
TITLE OF APPLN.: REDUCING BURN-IN ASSOCIATED WITH MISMATCHED VIDEO IMAGE/DISPLAY ASPECT RATIOS			
FILING DATE:	1/15/2004	ART UNIT:	2622
FIRST INVENTOR: Todd S. Bowser			
TITLE OF DOCUMENT (and List of Attachments): Transmittal, Amendment; Fee Trans., PTO-2038			

Total Number of Pages 18(including this form)

### COMMENTS

### CONFIDENTIAL AND PRIVILEGED ATTORNEY/CLIENT INFORMATION

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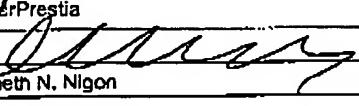
<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/757,844
		Filing Date	January 15, 2004
		First Named Inventor	Todd S. Bowser
		Art Unit	2622
		Examiner Name	Brian P Yenke
Total Number of Pages in This Submission 17		Attorney Docket No.	MATP-641US

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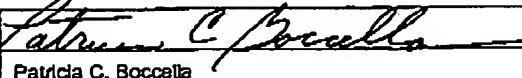
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO-2038
Remarks:		

#### SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm Name	RatnerPrestia
Signature	
Printed Name	Kenneth N. Nigon
Date	November 20, 2006
Registration No.	31,549

#### CERTIFICATE OF TRANSMISSION / MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	
Typed or Printed Name	Patricia C. Boccella
Date	November 20, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

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Effective on 12/08/04.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2006

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 50.00)

Complete If Known

Application Number	10/757,844	RECEIVED
Filing Date	January 15, 2004	CENTRAL FAX CENTER
First Named Inventor	Todd S. Bowser	NOV 20 2006
Examiner Name	Brian P. Yenke	
Art Unit	2622	
Attorney Docket No.	MATP-841US	

## METHOD OF PAYMENT (check all that apply)

 Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_ Deposit Account Deposit Account Number: 18-0350 Deposit Account Name: RatnerPrestia

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s)<br>under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                       |

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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims		Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		Small Entity
	Fee (\$)	Fee (\$)			Fee (\$)	Fee (\$)	
24	- 23 or HP =	1	x .50 =	.50	—	—	Fee (\$)
HP = highest number of total claims paid for, if greater than 20							Fee (\$)

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

- 3 or HP = x = — —

HP = highest number of independent claims paid for, if greater than 3

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.62(e)), the application size fee due is \$250 (\$125 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

- 100 = / 50 = (round up to a whole number) x = —

## 4. OTHER FEE(S).

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_ Fees Paid (\$)

SUBMITTED BY		Complete (if applicable)			
Signature		Registration No. Attorney/Agent)	31,549	Telephone	610-407-0700
Name (Print/Type)	Kenneth N. Nigon			Date	November 20, 2006

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

Effective on 12/08/04.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2006

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 50.00)

Complete if Known

Application Number	10/757,844	RECEIVED
Filing Date	January 15, 2004	CENTRAL FAX CENTER
First Named Inventor	Todd S. Bowser	NOV 20 2006
Examiner Name	Brian P. Yenke	
Art Unit	2822	
Attorney Docket No.	MATP-841US	

## METHOD OF PAYMENT (check all that apply)

 Check  Credit Card  Money Order  None  Other (please identify):

 Deposit Account Deposit Account Number: 18-0350 Deposit Account Name: RatnerPrestia

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Charge fee(s) indicated below  | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                       |

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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	—
Design	200	100	100	50	130	65	—
Plant	200	100	300	150	160	80	—
Reissue	300	150	500	250	600	300	—
Provisional	200	100	0	0	0	0	—

## 2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues):

Small EntityFee (\$) Fee (\$)

50 25

Each independent claim over 3 (including Reissues):

200 100

Multiple dependent claims:

360 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
24	- 23 or HP = 1	x 50	= 50	—	—	—

HP = highest number of total claims paid for, if greater than 20

Indep. Claims

Extra Claims	Fee (\$)	Fee Paid (\$)
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- 3 or HP =	x	=
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HP = highest number of independent claims paid for, if greater than 3

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Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 =	/ 50 =	(round up to a whole number)	x	=
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## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

Fees Paid (\$)

SUBMITTED BY	Complete if applicable				
Signature		Registration No. Attorney/Agent	31,549	Telephone	610-407-0700
Name (Print/Type)	Kenneth N. Nigon			Date	November 20, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22213-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22213-1450.

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